

**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**



Declaration
Submitted
With Initial
Filing

OR



Declaration
Submitted after Initial
Filing (surcharge
(37 CFR 1.15 (e))
required)

Attorney Docket Number

2003-0315.02 (58585.US/46)

First Named Inventor

COMPLETE IF KNOWN

Application Number

Filing Date

Art Unit

Examiner Name

I hereby declare that:

Each inventor's residence, mailing address, and citizenship are as stated below next to their name.

I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

METHOD FOR IMPROVING FLOW THROUGH FLUIDIC CHANNELS

(Title of the Invention)

the specification of which



is attached hereto

OR



was filed on (MM/DD/YYYY)

as United States Application Number or PCT International

Application Number

and was amended on (MM/DD/YYYY)

(if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT International filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT International application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				Yes	No
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

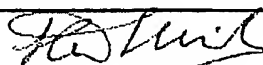
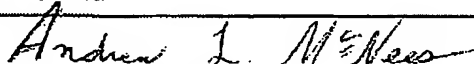
☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

(Page 1 of 2)

This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1460, Alexandria, VA 22313-1460. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1460, Alexandria, VA 22313-1460.

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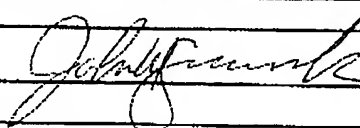
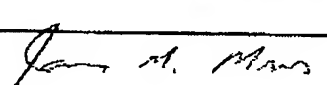
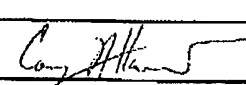
DECLARATION — Utility or Design Patent Application

Direct all correspondence to: <input checked="" type="checkbox"/> Customer Number: <input type="text" value="21872"/> OR <input type="checkbox"/> Correspondence address below			
Name			
Address			
City		State	ZIP
Country	Telephone	Fax	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.			
NAME OF SOLE OR FIRST INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any)) Karthik		Family Name or Surname Valdeeswaran	
Inventor's Signature 		Date 10/28/03	
Residence: City Lexington	State Kentucky	Country USA	Citizenship INDIA
Mailing Address 2069 Allegheny Way			
City Lexington	State KY	ZIP 40513	Country USA
NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any)) Andrew L.		Family Name or Surname McNees	
Inventor's Signature 		Date 10/28/03	
Residence: City Lexington	State Kentucky	Country USA	Citizenship US
Mailing Address 305 Lindenhurst Drive #2114			
City Lexington	State KY	ZIP 40509	Country USA
<input type="checkbox"/> Additional inventors or a legal representative are being named on the supplemental sheet(s) PTO/SB/02A or 021R attached hereto.			

DECLARATION

ADDITIONAL INVENTOR(S) Supplemental Sheet

Page 1 of 1

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
John W.		Krawczyk	
Inventor's Signature 		Date 10/28/03	
Lexington Residence: City	Kentucky State	USA Country	US Citizenship
4390 Clearwater Way, Apt. 2411 Mailing Address			
Mailing Address			
Lexington City	KY State	40515 Zip	USA Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
James M.		Miron	
Inventor's Signature 		Date 10/28/03	
Lexington Residence: City	Kentucky State	USA Country	US Citizenship
4637 Spring Creek Drive Mailing Address			
Mailing Address			
Lexington City	KY State	40615 Zip	USA Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Cory N.		Hammond	
Inventor's Signature 		Date 10-28-03	
Winchester Residence: City	Kentucky State	USA Country	US Citizenship
980 Stonor Ephesus Road Mailing Address			
Mailing Address			
Winchester City	KY State	40391 Zip	USA Country

This collection of information is required by 35 U.S.C. 116 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1460, Alexandria, VA 22313-1460.

If you need assistance in completing the form, call 1-800-PTO-9199 (1-800-788-9199) and select option 2.

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DECLARATION**ADDITIONAL INVENTOR(S)**
Supplemental Sheet

Page ____ of ____

Name of Additional Joint Inventor, If any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Mark L.		Doerns	
Inventor's Signature <i>Mark L. Doerns</i>		Date <i>10/28/03</i>	
Lexington Residence: City	Kentucky State	USA Country	US Citizenship
4312 Fieldspoint Mailing Address			
Mailing Address			
Lexington City	KY State	40514 Zip	USA Country
Name of Additional Joint Inventor, If any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Jason T.		Vanderpool	
Inventor's Signature <i>Jason T. Vanderpool</i>		Date <i>11-03-03</i>	
Lexington Residence: City	Kentucky State	USA Country	US Citizenship
4306 Catala Place Mailing Address			
Mailing Address			
Lexington City	KY State	40515 Zip	USA Country
Name of Additional Joint Inventor, If any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Grish S.		Pett	
Inventor's Signature <i>Grish S. Pett</i>		Date <i>10-28-03</i>	
Lexington Residence: City	Kentucky State	USA Country	US Citizenship
2345 Golden Oak Drive Mailing Address			
Mailing Address			
Lexington City	KY State	40515 Zip	USA Country

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DECLARATION

ADDITIONAL INVENTOR(S) Supplemental Sheet

Page 1 of 1

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Christopher J.		Money	
Inventor's Signature <i>Christopher J Money</i>		Date <i>10/28/03</i>	
Lexington Residence: City	Kentucky State	USA Country	US Citizenship
212 Masterson Station Drive Mailing Address			
Mailing Address			
Lexington City	KY State	40511 Zip	USA Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Gary R.		Williams	
Inventor's Signature <i>Gary R. Williams</i>		Date <i>10/28/03</i>	
Lexington Residence: City	Kentucky State	USA Country	US Citizenship
3218 Plumco Parkway Mailing Address			
Mailing Address			
Lexington City	KY State	40517 Zip	USA Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Richard L.		Warner	
Inventor's Signature <i>Richard L. Warner</i>		Date <i>12/25/03</i>	
Lexington Residence: City	Kentucky State	USA Country	US Citizenship
272 Winn Way Mailing Address			
Mailing Address			
Lexington City	KY State	40503 Zip	USA Country

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PTO/SB/81 (09-03)

POWER OF ATTORNEY and CORRESPONDENCE ADDRESS INDICATION FORM

Application Number	
Filing Date	
First Named Inventor	Mark L Doerre
Title	Methods for Improving Flow Through Fluidic Channels
Art Unit	
Examiner Name	
Attorney Docket Number	2003-0315.02

I hereby appoint:

☒ Practitioners associated with the Customer Number:

21972

OR

☐ Practitioner(s) named below:

Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

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Address

City

State

Zip

Country

Telephone

Fax

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Name	Karthik Vaideeswaran
Signature	<i>[Signature]</i>
Date	10/28/03
Telephone	859-232-1260

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ Total of 11 forms are submitted.

This collection of information is required by 37 CFR 1.31 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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PTO/SB/81 (09-03)
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Application Number	
Filing Date	
First Named Inventor	Mark L Doerre
Title	Methods for Improving Flow Through Fluidic Channels
Art Unit	
Examiner Name	
Attorney Docket Number	2003-0315.02

I hereby appoint:

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Address				
Address				
City		State		Zip
Country				
Telephone		Fax		

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Name	Andrew L. McNees		
Signature	<i>Andrew L. McNees</i>		
Date	10/28/03	Telephone	859-232-6528

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

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Attorney Docket Number	2003-0315.02

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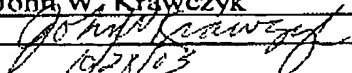
<input type="checkbox"/> Firm or Individual Name				
Address				
Address				
City		State		Zip
Country				
Telephone		Fax		

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/06).

SIGNATURE of Applicant or Assignee of Record

Name	John W. Krawczyk		
Signature			
Date	10/21/03	Telephone	859-232-7025

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

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Application Number	
Filing Date	
First Named Inventor	Mark L Doerre
Title	Methods for Improving Flow Through Fluidic Channels
Art Unit	
Examiner Name	
Attorney Docket Number	2003-0315.02

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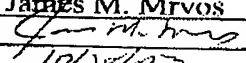
<input type="checkbox"/> Firm or Individual Name				
Address				
Address				
City		State		Zip
Country				
Telephone		Fax		

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/06).

SIGNATURE of Applicant or Assignee of Record

Name	James M. Mrvos		
Signature			
Date	10/28/03	Telephone	857-232-5498

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

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Application Number	
Filing Date	
First Named Inventor	Mark I. Doerre
Title	Methods for Improving Flow Through Fluidic Channels
Art Unit	
Examiner Name	
Attorney Docket Number	2003-0315.02

I hereby appoint:

☒ Practitioners associated with the Customer Number:

21972

OR

☐ Practitioner(s) named below:

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as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please recognize or change the correspondence address for the above-identified application to:

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OR

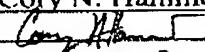
☐ The address associated with Customer Number:

OR

<input type="checkbox"/> Firm or Individual Name				
Address				
Address				
City	State	Zip		
Country				
Telephone	Fax			

I am the:

☒ Applicant/Inventor.☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).**SIGNATURE of Applicant or Assignee of Record**

Name	Cory N. Hammond		
Signature			
Date	10-28-03	Telephone	(859) 232-5639

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ Total of 11 forms are submitted.

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Application Number	
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First Named Inventor	Mark L Doerre
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Art Unit	
Examiner Name	
Attorney Docket Number	2003-0315.02

I hereby appoint:

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21972

OR

☐ Practitioner(s) named below:

Name	Registration Number

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State

Zip

Country

Telephone

Fax

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.

Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Name	Christopher J. Money		
Signature	<i>Christopher J. Money</i>		
Date	10/28/03	Telephone	859 232 4493

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ Total of 11 forms are submitted.

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POWER OF ATTORNEY and CORRESPONDENCE ADDRESS INDICATION FORM

Application Number	
Filing Date	
First Named Inventor	Mark L Doerre
Title	Methods for Improving Flow Through Fluidic Channels
Art Unit	
Examiner Name	
Attorney Docket Number	2003-0315.02

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SIGNATURE of Applicant or Assignee of Record

Name	Gary R. Williams		
Signature	<i>Gary R. Williams</i>		
Date	10-28-03	Telephone	859-232-6506

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SIGNATURE of Applicant or Assignee of Record

Name	Richard L. Warner		
Signature	<i>Richard L. Warner</i>		
Date	10/28/03	Telephone	859-232-6175

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Attorney Docket Number	2003-0315.02

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SIGNATURE of Applicant or Assignee of Record

Name	Mark L Doerre		
Signature			
Date	10/28/03	Telephone	854 232-3709

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PTO/SB/81 (09-03)

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SIGNATURE of Applicant or Assignee of Record

Name	Jason T. Vanderpool
Signature	<i>Jason T. Vanderpool</i>
Date	11-03-03
Telephone	

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SIGNATURE of Applicant or Assignee of Record

Name	Girish S. Patil		
Signature	<i>Girish S. Patil</i>		
Date	10-28-03	Telephone	859-232-6476

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